OFFICE USE ONLY	
Subdivision #	
Date	

TOWN OF BLACKSBURG

SUBDIVISION PLAT REVIEW APPLICATION

This application and accompanying information must be submitted in full before the subdivision request can be reviewed by staff or referred to the Planning Commission for consideration. Please contact the Planning and Engineering Department at (540) 961-1126 for application deadline and questions.

Subdivision Name:		
a. Location:		
1. G'		
c. Number of Lots:		
N. CD. (A)		
Name of Property Owner(s):		
Address of Owner:	Phone:	
	Fax:	
Applicant:	Phone:	
Applicant:(to whom comments will be sent)	Fax:	
Project Engineer (if different from applicant):		
Zoning District of Site:		
Request Review of:		
• Concept Plan		
2 blue line copies of plat		
 No fee required 		
Preliminary Plat		
Minor Subdivision (1-5 lots)		
• 4 blue line copies of plat		
Review fee		
 \$50/plat plus \$10/lot 		
Major Subdivision (6+ lots)		
 36 blue line copies of plat 		
Review fee		
 6-10 lots \$100/plat plus \$10/lot 		
■ 11 + lots \$150/plat plus \$10/lot		
 Name and address for adjacent property 		
owners and properties across the street		
 First class postage costs for mailing notices 		

Final Plat			
 4 blue lin 	ne copies of plat		
	ee is not required unless n	0	
	inary plat has been filed		
1	J 1		
SIGNATURE OF A	PPLICANT:		
DATE:			
For official Use Only:			
Acceptedl	Rejected	Date	
(The agent must accept of re	eject application within 15	days)	
Reason for rejection			